under 37 CFR 1.52 or 1.53

Edwards Vacuum, Inc.

Mary K. Nicholes

Firm Name

Signature
Printed name

PTO/SB/21 (10-08)

RECEIVED CENTRAL FAX CENTER

NOV 1 8 2008

Approved for use through 11/30/2008. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1985, no persons are required to rescond to a collection of information unless it displays a valid OMB control number. Application Number 10/531558 Filing Date TRANSMITTAL 01-27-2006 First Named Inventor Kevin Ransom FORM Art Unit 3746 Examiner Name STIMPERT PHILIPEARL (to be used for all correspondence after initial filing) Attorney Docket Number M028154 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Drawing(s) Fee Transmittal Form Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Petition Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please identify Terminal Disclaimer balow): **Extension of Time Request** Power of Attorney to Prosecute Applications Request for Refund before the USPTO (PTO/SB/80) Express Abandonment Request CD. Number of CD(s) Information Disclosure Statement Statement Under 37 CFR 3.73(b) (PTO/SB/96) Landscape Table on CD Remarks Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts

Date	bremb	er 18.	2008	Reg. No.	56, 238		<u> </u>	_
		CERTIFICAT	TE OF TRANSM	IISSION/MAI	ILING			`
I here by certify that this esufficient postage as firs	correspondence t class mail in an	is being facsimile envelope addres	transmitted to the Ussed to: Commission	SPTO or depos er for Patents, i	sited with the Unit P.O. Box 1450, A	ed States Posta lexandria, VA 22	l Service with 2313-1450 on	
Signature	1	. Den						
Typed or printed name	Ch	rista	DeMo	rk	Date	11/18/	108	_

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTC to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTC. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED CENTRAL FAX CENTER

NOV 1 8 2008

PTC/SB/80 (01-05)
Approved for use through 12/31/2008, OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid CMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

Thereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). Thereby appoint Practitioners associated with the Customer Number: Name Registration Number Name Registration Number Name Registration Number Registration Number Registration Number Registration Number Registration Number Registration Number The address associated with the undersigned before the United States Patent and Trademark Clifice (USPTC) in connection with any and all patent application sessigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 71134 Resignee Name and Address. Edwards Limited Manor Royal Telephone Emeli Emeli Recopy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/Ne or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners application in which this Power of Attorney is to be filled. Signature Name Date Prespict on the assignee. Pate provided to act on behalf of the assignee. Signature Registration Address associated with the subject of actions behalf of the assignee. Pate provided the provided by the subject of act on behalf of the assignee. Pate provided the provided the provided to act on behalf of the assignee. Pate provided the provided to act on behalf of the assignee. Pate provided the provided to act on behalf of the assignee. Pate provided the provided to act on behalf of the assignee. Pate provided the provided the provided to act on behalf of the assignee. Pate provided the provided to act on behalf of the								
Practitioners associated with the Customer Number: 71134			ers of attorney gi	ven in the app	ication identified i	n the attached sta	tement under	
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name			-					
Practitioner(s) named below (if more than ten patent practitioners are to be ramed, then a customer number must be used): Name	Pract	7404						
Name Registration Number Registration Number Registration Number Registration Number Registration Number Number Registration Regist	OR		l					
as attomey(e) or agent(e) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment attached to first form in accordance with 37 CPR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: OR Firm or Individual Name Address City Country Telephone Email Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Date Not 7.7. Which is possible and the signature and file is supplied below is authorized to act on behalf of the assignee. Signature Date Not 7.7. Which is possible and provided in this Power of Attorney is to be filed. Signature Date Not 7. Telephone 973-285-3306	Pract	itioner(s) named below (if mo	ore than ten patent pro	actitioners are to b	e named, then a custo	omer number must be	used):	
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number:		Name	F	Registration Number	Ň	ame		
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number:								
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number:								
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number:					•	•		
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number:		<u>-</u>						
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number:	▎ ├─							
The address associated with Customer Number: OR Firm or Individual Name Address City Country Telephone Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. SIGNATURE of Assignee of Record The individual whose signature and fittle is supplied below is authorized to act on behalf of the assignee Signature Date // / 7 / / / / / / / / / / / / / / / /	any and all	patent applications assigned	only to the undersign	the United States ed according to th	Patent and Trademar e USPTO assignment	rk Office (USPTO) in c records or assignmen	onnection with il documents	
Firm or Individual Name Address City State Zip Country Telephone Email Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/88/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and file is supplied below is authorized to act on behalf of the assignee. Signature Date No. 7. 2006 Name	Please char	nge the correspondence add	ress for the application	n Identified in the	attached statement un	der 37 CFR 3.73(b) to	:	
Firm or Individual Name Address City State Zip Country Telephone Email Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/88/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and file is supplied below is authorized to act on behalf of the assignee. Signature Date No. 7. 2006 Name					71124			
Address City State Zip Country Telephone Email Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/88/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Signature Date VIV. 7 VIV. Name James A. Snyder Telephone 973-285-3306		The address associated with Customer Number:						
Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Date Nav. 7 2006 Name James A. Snyder Telephone 973-285-3306								
Country Telephone Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and fitte is supplied below is authorized to act on behalf of the assignee. Signature Date VIV. 7 2006 Date VIV. 7 2006 Name		inqual Harrie						
Country Telephone Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and fitte is supplied below is authorized to act on behalf of the assignee. Signature Date VIV. 7 2006 Date VIV. 7 2006 Name	Chy			State		Zip		
Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and little is supplied below is authorized to act on behalf of the assignee. Signature Date Nov. 7 2000 Telephone 973-285-3306	ــــــــــــــــــــــــــــــــــــــ			Glaid				
Assignee Name and Address: Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Date VVV. 7.0006 Name James A. Snyder Telephone 973-285-3306	Country				· · · · · · · · · · · · · · · · · · ·			
Edwards Limited Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and fitte is supplied below is authorized to act on behalf of the assignee. Signature Date Vol. 7. 2006 Name James A. Snyder Telephone 973-285-3306	Telephone				Email			
Manor Royal Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Date VVV.7.000 James A. Snyder Telephone 973-285-3306	Assignee N	ame and Address:						
Crawley, West Sussex, United Kingdom RH10 9LW A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Date VVV.7.000 James A. Snyder Telephone 973-285-3306	Edwards	Limited						
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Date VVV.7. VVV James A. Snyder Telephone 973-285-3306						•		
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Date /// / // // // // // // // // // // //	Crawley,	West Sussex, United K	Ingdom RH10 9L	w			t	
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Date /// / // // // // // // // // // // //	A copy of	this form, together with	a statement unde	r 37 CFR 3.73(b) (Form PTO/SB/9	6 or equivalent) is	required to be	
SIGNATURE of Assignee of Record The individual whose signature and little is supplied below is authorized to act on behalf of the assignee Signature Date VVV.7.2000 Name James A. Snyder Telephone 973-285-3306	flied in ea	ch application in which	this form is used.	The statemen	t under 37 CFR 3.7 er is sutbodzed to	'3(b) may be comp	leted by one of le assignée.	
The individual whose signature and the is supplied below is authorized to act on behalf of the assignee Signature Name Date VVV.7 2006 Telephone 973-285-3306	and must	identify the application	in which this Pow	er of Attorney	s to be filed.			
Signature Date No. 7, 2006 Name James A. Snyder Telephone 973-285-3306		The individual whose	SIGNATL	JRE of Assignee supplied below i	of Record s authorized to act on	behalf of the assigner	:	
Name James A. Snyder Telephone 973-285-3306	Signature		5 //			0/42/	2008	
		-	Jam	ies A. Snyder		Telephone 973	-285-3306	
		-			and Secretary			

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED CENTRAL FAX CENTER P.3

NOV 1 8 2008

PTO/SB/96 (10-08)
Approved for use through 11/30/2008, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner. Edwards Limited
Application No./Patent No.: 10/531558 Filed/Issue Date: January 27, 2006
Entitled: Screw pump
Edwards Limited corporation corporation (Type of Assignee, e.g., corporation partnership, university, government agency, etc.)
states that it is:
1. the assignee of the entire right, title, and interest; or
an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%)
in the patent application/patent identified above by virtue of either:
An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy therefore is attached.
OR
A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:
1. From: Kevin M. Ransom, Clive M. L. Tunna, Cliff Cai To: The BOC Group, plc.
The document was recorded in the United States Patent and Trademark Office at Reel 017064, Frame 0061, or for which a copy thereof is attached.
2. From: The BOC Group, plc. and BOC Limited To: Edwards Limited
The document was recorded in the United States Patent and Trademark Office at Reet 020083 Frame 0897 or for which a copy thereof is attached.
3. From: To:
The document was recorded in the United States Patent and Trademark Office at
Reel, Frame, or for which a copy thereof is attached.
Additional documents in the chain of title are listed on a supplemental sheet.
As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.
[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]
The undersigned (whose title is expliced below) is authorized to act on behalf of the assignee.
Signature Date
James A. Snyder 973-285-3306 Printed or Typed Name Telephone Number
· · · · · · · · · · · · · · · · · · ·
General Counsel and Secretary Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.